

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	11/15/01		5/30/02
O.I.P.E. CLASSIFIER		8	6-1301
FORMALITY REVIEW	WIK	52 584	7/25/01
RESPONSE FORMALITY REVIEW	A-M	584	10-15-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	11/22/02
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	11/22/02
51	✓
52	✓
53	✓
54	✓
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100	✓

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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